

**STATE OF CALIFORNIA  
UNDERGROUND STORAGE TANK CLEANUP FUND**

# **ELECTRONIC SPREADSHEET INSTRUCTIONS**

**STATE WATER RESOURCES CONTROL BOARD  
DIVISION OF FINANCIAL ASSISTANCE**

**Mailing Address:**

**STATE WATER RESOURCES CONTROL BOARD  
UST CLEANUP FUND PROGRAM  
P.O. BOX 944212  
SACRAMENTO, CA 94244-2120**

Contact Fund at: 1-800-813-FUND(3863) or

**Physical Address:**

**STATE WATER RESOURCES CONTROL  
BOARD  
UST CLEANUP FUND PROGRAM  
1001 I STREET, 17<sup>th</sup> Floor  
SACRAMENTO, CA 95814-2828**

[www.swrcb.ca.gov/cwphome/ustcf](http://www.swrcb.ca.gov/cwphome/ustcf)

## **Instructions for electronic data entry into the Reimbursement Request Spreadsheet**

The Underground Storage Tank Cleanup Fund (USTCF) has reimbursement request spreadsheets available on our web site at [Reimbursement Request Spreadsheet](#). By obtaining your data electronically it will reduce input errors, redundant data entry and overall processing time.

The Microsoft Excel spreadsheet is divided into tabs (see illustration). Each tab is identified by sheet numbers, i.e. Sheet1&2, Sheet3&4 ... Sheet43&44 etc. There are 23 tabs. Each tab has two data sheets. Each data sheet has 15 rows for data entry. Please do not adjust the data sheet format. Any adjustments may cause a failure when we import your data into our system.

Begin filling in Sheet1&2 with your data. Be sure to enter the Claim Heading Information (i.e. Claimant, Claim No, Request No, and Region). This information will carry throughout all subsequent sheets automatically. If you need additional sheets for your data just click on the next tab i.e. Sheet3&4 for the next two sheets.

Be sure to enter the Invoice and Check information in the appropriate columns. Also, enter any comments you feel necessary in the comment column (see illustration).

Save the spreadsheet to a diskette and submit it with your reimbursement request. Do not be concerned with unused sheets. They will be deleted during importing into our system. Also, print out two hard copies. Submit one hard copy with your Reimbursement Request and keep the other for your records.

Printing can be accomplished by first clicking on a tab, i.e. Sheet1&2, then click on File in the tool bar and scroll down and click on Print. If you want multiple sheets printed, hold down the control key while selecting the tabs, i.e. Sheets1&2, Sheet3&4 and Sheet5&6 then go to File and Print.

**Example of a Reimbursement Request Spreadsheet depicting claim heading, tabs, and the starting point for invoice and check information.**

Spreadsheet No. 1 of 46												
Claimant Sheet												
Claimant: Enter the Claim Heading Information here. Claim No: This information will carry throughout all Request No: subsequent sheets automatically. Region:												
										Payment Verification		
Payee	Purpose	Invoice No.	Invoice Date	Invoice Amount	Amount Requested	Ineligible \$	Eligible Third Party	Check No.	Check Date	Check Amount	USTCF Spreadsheet Comments	
Previous Total (Last Reimbursement)												
Begin entering Invoice and Check Information here at Record # 1												
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Each Tab contains two Spread Sheets

Sheet1&2 / Sheet3&4 / Sheet5&6 / Sheet7&8 / Sheet9&10 / Sheet11&12